

**STATE OF MICHIGAN  
MICHIGAN ADMINISTRATIVE HEARING SYSTEM  
ADMINISTRATIVE HEARINGS FOR THE  
DEPARTMENT OF HUMAN SERVICES**

**IN THE MATTER OF:**

[REDACTED]

Reg. No.: 201229570  
Issue No.: 2006  
Case No.: [REDACTED]  
Hearing Date: May 3, 2012  
County: Monroe DHS

**ADMINISTRATIVE LAW JUDGE:** Christian Gardocki

**HEARING DECISION**

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 following Claimant's request for a hearing. After due notice, an in-person hearing was held on May 3, 2012 from Monroe, Michigan. Participants on behalf of Claimant included the above named claimant; [REDACTED] testified and appeared as Claimant's authorized hearing representative. Participants on behalf of Department of Human Services (DHS) included [REDACTED], Specialist.

**ISSUE**

The issue is whether DHS properly denied Claimant's application for MA benefits based on Claimant's failure to attend a medical appointment and/or provide medical documentation.

**FINDINGS OF FACT**

The Administrative Law Judge, based on the competent, material, and substantial evidence on the whole record, finds as material fact:

1. On 11/15/11, Claimant applied for MA benefits including a request for retroactive MA benefits (see Exhibits 5-6) from 8/2011.
2. As part of Claimant's application for MA benefits, Claimant alleged that he was a disabled individual.
3. On unspecified dates, Claimant submitted two Authorization to Release Medical Information forms (Exhibits 12-15), Medical Social Questionnaire (Exhibits 20-22) and Activities of Daily Living (Exhibits 23-27) to DHS.

4. Claimant informed DHS that he was hospitalized on at least two prior occasions within the previous 12 months and that medical records existed which would verify his claim of disability.
5. On 11/29/11, DHS scheduled Claimant for a medical appointment on [REDACTED] (see Exhibit 33).
6. Claimant failed to attend the DHS scheduled medical appointment.
7. On [REDACTED], DHS mailed a Notice of Case Action informing Claimant that the MA benefit application was denied due to Claimant's missed appointment and the failure to present DHS with any other medical documentation from which a DHS disability decision could be made.
8. On 1/20/12, Claimant requested a hearing to dispute the MA benefit application denial.

### **CONCLUSIONS OF LAW**

The Medical Assistance (MA) program is established by Title XIX of the Social Security Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). DHS administers the MA program pursuant to MCL 400.10, et seq., and MCL 400.105. Department policies are found in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Reference Tables Manual (RFT).

MA provides medical assistance to individuals and families who meet financial and nonfinancial eligibility factors. The goal of the MA program is to ensure that essential health care services are made available to those who otherwise would not have financial resources to purchase them.

In the present case, DHS denied Claimant's MA benefit application due to Claimant failing to attend a medical appointment scheduled on his behalf. DHS policy has some support for denying an application based on a missed medical appointment.

The client is responsible for providing evidence needed to prove disability or blindness. BEM 260 at 4. However, DHS must assist the customer when they need help to obtain it. *Id.* Such help includes scheduling medical exam appointments and paying for medical evidence and medical transportation. *Id.* A client who refuses or fails to submit to an exam necessary to determine disability or blindness cannot be determined disabled or blind and you (the assigned specialist) should deny the application or close the case. *Id.* It is not necessary to return the medical evidence to MRT for another decision in this instance. *Id.*

DHS contended that Claimant failed to present any other medical evidence to establish disability and the failure to attend the medical appointment justified the application denial. Claimant presented three other forms to DHS, two Authorization to Release

Medical Information forms (Exhibits 12-15), Medical Social Questionnaire (Exhibits 20-22) and Activities of Daily Living (Exhibits 23-27) to DHS. All three of the forms (four if each Authorization to Release Medical Information is counted) are client completed forms and are used to guide DHS in the disability analysis process.

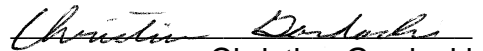
Claimant's Medical Social Questionnaire noted at least two hospital encounters from the previous 12 months; a third hospital encounter was listed, though no dates were given concerning when Claimant went to the hospital. A fourth hospital encounter (from 2002) was also listed. The documents established a basis for medical documentation that DHS could have utilized in the disability analysis process. Because there were existing medical records which might have established that Claimant was disabled, it cannot be stated that a physical examination of Claimant was necessary to determine disability. If a scheduled medical appointment is not necessary to establish disability, DHS has no basis to deny the application for MA benefits for a client that misses the appointment. Accordingly, it is found that DHS improperly denied Claimant's application for MA benefits.

### **DECISION AND ORDER**

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds that DHS improperly denied Claimant's application for MA benefits. It is ordered that DHS:

- (1) reinstate Claimant's application dated 11/15/11 requesting MA benefits including the request for retroactive MA benefits from 8/2011; and
- (2) process Claimant's application for MA benefits subject to the finding that sufficient medical records exist to establish Claimant's claim of disability.

The actions taken by DHS are REVERSED.

  
Christian Gardocki  
Administrative Law Judge  
for Maura Corrigan, Director  
Department of Human Services

Date Signed: May 15, 2012

Date Mailed: May 15, 2012

**NOTICE:** Michigan Administrative Hearing System (MAHS) may order a rehearing or reconsideration on either its own motion or at the request of a party within 30 days of the mailing date of this Decision and Order. MAHS will not order a rehearing or reconsideration on the Department's motion where the final decision cannot be implemented within 90 days of the filing of the original request. (60 days for FAP cases).

The Claimant may appeal the Decision and Order to Circuit Court within 30 days of the receipt of the Decision and Order or, if a timely request for rehearing was made, within 30 days of the receipt date of the rehearing decision.

Claimant may request a rehearing or reconsideration for the following reasons:

- A rehearing **MAY** be granted if there is newly discovered evidence that could affect the outcome of the original hearing decision.
- A reconsideration **MAY** be granted for any of the following reasons:
  - misapplication of manual policy or law in the hearing decision,
  - typographical errors, mathematical error, or other obvious errors in the hearing decision that effect the substantial rights of the claimant:
  - the failure of the ALJ to address other relevant issues in the hearing decision.

Request must be submitted through the local DHS office or directly to MAHS by mail at  
Michigan Administrative Hearings  
Reconsideration/Rehearing Request  
P. O. Box 30639  
Lansing, Michigan 48909-07322

CG/hw

cc:

